	Case 23-10616-ı		iled 03/06/24 Entered 03/06 ocument Page 1 of 3	6/24 16:59:01 Desc Main
Fill	in this information to identify your o	case:		
D	ebtor 1 Cristina First Name		Cardona Last Name	
(S	ebtor 2 ipouse, if filing) First Name nited States Bankruptcy Court for the		Last Name District of Pennsylvania	Check if this is: ☑ An amended filing ☐ A supplement showing postpetition
_	ase number 23-1061 known)	6-mdc		chapter 13 income as of the following date: MM / DD / YYYY
	ficial Form 1061 chedule I: Your In			
po	use is not filing with you, do not in			n about your spouse. If you are separated and your
	rt 1: Describe Employment Fill in your employment	case number (if known).		ch a separate sheet to this form. On the top of any
	rt 1: Describe Employment			Ch a separate sheet to this form. On the top of any Debtor 2 or non-filing spouse
	rt 1: Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with information about additional		Answer every question.	
	rt 1: Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with	Employment status Occupation Employer's name	Debtor 1 □ Employed ☑ Not Employed	Debtor 2 or non-filing spouse ☐ Employed Not Employed
	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or	case number (if known). Employment status Occupation	Debtor 1 □ Employed ☑ Not Employed	Debtor 2 or non-filing spouse ☐ Employed Not Employed

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

How long employed there?

Case 23-10616-mdc Doc 43 Filed 03/06/24 Entered 03/06/24 16:59:01 Desc Main Page 2 of 3 Document Debtor 1 Cristina Cardona Case number (if known) 23-10616-mdc Μ. First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse \$0.00 \$0.00 Copy line 4 here..... 4. List all payroll deductions: \$0.00 \$0.00 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. 5h. Other deductions. Specify: \$0.00 \$0.00 5h. \$0.00 \$0.00 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$0.00 \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 \$0.00 monthly net income. 8a. \$0.00 \$0.00 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. \$0.00 \$0.00 8c. \$0.00 \$0.00 8d. Unemployment compensation 8d. 8e. Social Security \$0.00 \$1,151.00 8e. 8f. Other government assistance that you regularly receive 9. 10. 11.

	or. Other government assistance that you regularly receive								
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.								
	Specify: SNAP	8f.	_	\$219.00		\$0.0	00		
	8g. Pension or retirement income	8g.	_	\$0.00		\$341.9	99		
	8h. Other monthly income. Specify: Pro rata 2022 federal tax refund	8h.	+_	\$151.08	4	\$0.0	00		
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.		\$370.08		\$1,492.	99		
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	_	\$370.08	+	\$1,492.	99_	=	\$1,863.07
11.	State all other regular contributions to the expenses that you list in Schee	dule J.							
	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .								
	Specify: Contributions from children						11	+_	\$620.00
12.	2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$2,483.0						\$2,483.07		
								_	Combined nonthly income
13.	Do you expect an increase or decrease within the year after you file this f	orm?							
	No. Debtor applied for social security disability benefits.								
	✓ Yes. Explain:								

Case 23-10616-mdc Doc 43 Filed 03/06/24 Entered 03/06/24 16:59:01 Desc Main Document Page 3 of 3

Fill in this information to identify your case:				
Debtor 1	Cristina	М.	Cardona	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Eas	tern District of Pennsylvania	
Case number	23-10616-m	dc		
(if known)		.		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to	help you fill out bankruptcy forms?
✓No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summary	and schedules filed with this declaration and that they are true and correct.
X /s/ Cristina M. Cardona	
Cristina M. Cardona, Debtor 1	
Date 03/06/2024	
MM/ DD/ YYYY	